## LABOR COMPLIANCE PROGRAM ANNUAL REPORT

Format for Awarding Body that enforces its own Labor Compliance Program for some but not all projects

Report for the reporting period _	
12/1/2009 (mm/dd/yyyy)	
to 6/30/2010 (mm/dd/yyyy)	

1. Name of Labor Compliance Program (LCP): Red Bluff Union Elementary School District	3luff Union Elementary School District
2. LCP I.D. Number (assigned by DIR):	3. Date of Initial Approval:
2009-00622	12/29/2009
4. Contact person (include name, title, address, telephone, fax, and e-mail, if available):	ne, fax, and e-mail, if available):
Rachel Bentley, Payroll Specialist rben	rbentley@rbuesd.org
William McCoy, Superintendent wmc	wmccoy@rbuesd.org
Red Bluff Union Elementary School District (530)	(530)527-7200
1755 Airport Blvd. (530	(530)527-9308 fax
Red Bluff CA 96080	
5. Did LCP perform any LC § 1771.5 enforcement activities during the 12 months in the reporting period?	ivities during the 12 months in the reporting period?
Please check one:	If Yes, proceed to item 6 on the next page
X No If No, complete the	If No, complete the information below, sign the form and submit to DIR, Office of the Director, Attn: LCP Special Assistant,
	455 Golden Gate Avenue, 10th Floor, San Francisco CA 94102
What suggestions do you have for the Department of Ir necessary)	What suggestions do you have for the Department of Industrial Relations to better assist you with your program in the coming year? (attach additional sheets if necessary)

William McCoy, Superintendent
Name and Title

August 25, 2010 Date